

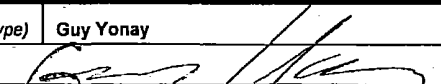
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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	P-5755-US
	First Inventor or Application Identifier	GINZBURG, B ris
	Title	METHOD AND APPARATUS FOR MULTI-CHANNEL WIRELESS LAN ARCHITECTURE
	Express Mail Label No.	

APPLICATION ELEMENTS See MPEP chapter 600 concerning patent application contents	ADDRESS TO: Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 16] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 4]	ACCOMPANYING APPLICATION PARTS 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 5303) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input checked="" type="checkbox"/> Postcard Other: _____
5. Oath or Declaration [Total Pages 4] <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ / _____ Prior application information: Examiner Group/Art Unit:	

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code		27130 (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below	
Name	Eitan, Pearl, Latzer & Cohen Zedek, LLP.				
Address	10 Rockefeller Plaza Suite 1001				
City	New York	State	New York	Zip Code	10020
Country	USA	Telephone	(212) 632-3480	Fax	(212) 632-3489

Name (Print/Type)	Guy Yonay	Registration No. (Attorney/Agent)	52,388
Signature		Date	30 June 2003

06/30/03

16179 U.S. PAT.

PTO/SB/17 (09-00)

Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$1,152

Complete if Known

Application Number	
Filing Date	
First Named Inventor	GINZBURG, Boris
Examiner Name	
Group / Art Unit	
Attorney Docket No.	P-5755-US

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number **05-0649**
Deposit Account Name **Eitan, Pearl, Latzer & Cohen Zedek, LLP**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	2001	750	Utility filing fee	750
1002	2002	330	Design filing fee	
1003	2003	520	Plant filing fee	
1004	2004	750	Reissue filing fee	
1005	2005	160	Provisional filing fee	

SUBTOTAL (1) (\$750

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from Below	Fee Paid
33	-20** = 13	x 18 =	234
Independent Claims	5	-3** = 2	x 84 = 168
Multiple Dependent		x	

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description
1202	2202	18	9 Claims in excess of 20
1201	2201	84	42 Independent claims in excess of 3
1203	2203	280	140 Multiple dependent claim, if not paid
1204	2204	84	42 **Reissue independent claims over original patent
1205	2205	18	9 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$402

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	2051	130	65 Surcharge - late filing fee or oath	
1052	2052	50	25 Surcharge - late provisional filing fee or cover sheet	
1053	2053	130	130 Non-English specification	
1812	2520	1812	2,520 For filing a request for ex parte reexamination	
1804	920*	1804	920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840* Requesting publication of SIR after Examiner action	
1251	2251	110	55 Extension for reply within first month	
1252	2252	410	205 Extension for reply within second month	
1253	2253	930	465 Extension for reply within third month	
1254	2254	1,450	725 Extension for reply within fourth month	
1255	2255	1,970	985 Extension for reply within fifth month	
1401	2401	320	160 Notice of Appeal	
1402	2402	320	160 Filing a brief in support of an appeal	
1403	2403	280	140 Request for oral hearing	
1451	2451	1,510	1,510 Petition to institute a public use proceeding	
1452	2452	110	55 Petition to revive - unavoidable	
1453	2453	1,300	650 Petition to revive - unintentional	
1501	2501	1,300	650 Utility issue fee (or reissue)	
1502	2502	470	235 Design issue fee	
1503	2503	630	315 Plant issue fee	
1460	1460	130	130 Petitions to the Commissioner	
1807	1807	50	50 Processing fee under 37 CFR 1.17(q)	
1806	1806	180	180 Submission of Information Disclosure Stmt	
8021	8021	40	40 Recording each patent assignment per property (times number of properties)	
1809	2809	750	375 Filing a submission after final rejection (37 CFR 1.129(a))	
1810	2810	750	375 For each additional invention to be examined (37 CFR 1.129(b))	
1801	2801	750	375 Request for Continued Examination (RCE)	
1802	900	900	900 Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY**Complete (if applicable)**

Name (Print /Type)	Guy Y nay	Registration No. (Attorney/Agent)	52,388	Telephone	(212) 632-3480
Signature		Date	June 30, 2003		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.